

ORIGINAL

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ILLINOIS COMMERCE COMMISSION**

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COMMERCE COMMISSION

Apr 14 2 03 PM '00

CHIEF CLERK'S OFFICE

Docket No. 00-0293
ICC Office Use Only

WJG MariTEL Corporation :
:
Application for a certificate of :
local authority to operate as a facilities :
based carrier of telecommunications :
services in the State of Illinois. :

**APPLICATION FOR CERTIFICATE TO BECOME A
TELECOMMUNICATIONS CARRIER**
(Use additional sheets as necessary.)

GENERAL

1. Applicant's Name(including d/b/a, if any) FEIN # _____

WJG MariTEL Corporation

Address: Street: 16 East 41st Street

City: New York Zip: 10017

2. Authority Requested: (Mark all that apply) ☒ 13-403 ☒ 13-404 ☒ 13-405

3. Request for waivers/variances: In applications for exchange service authority under Sections 13-404 or 13-405, waivers of Part 710 and of Section 735.180 of Part 735 are generally requested. In applications for interexchange service authority under Sections 13-403 and 13-404, waivers of Part 710 and Part 735 are generally requested. Please indicate which waivers Applicant is requesting.

☒ Part 710 ☒ Part 735 ☒ Section 735.180 ☐ Other

4. In what area of the state does the Applicant propose to provide service?

Applicant seeks to provide radiotelephone service pursuant to authority granted by the Federal Communications Commission to operate a Maritime Radio Service. 47 C.F.R. § 80.1 et. seq.

5. Please attach a sheet designating contact persons to work with Staff on the following:

- a) issues related to processing this application
b) consumer issues

- c) customer complaint resolution
- d) technical and service quality issues
- e) "tariff" and pricing issues
- f) 9-1-1 issues
- g) security/law enforcement

Please identify each contact person's (i) name, (ii) title, (iii) mailing address, (iv) telephone number, (v) facsimile number, and (vi) e-mail address, if any.

Contact Person for all matters (a-g):

Thom Belesky, Vice President of Advanced Technology
 WJG MariTEL Corporation
 365 Canal Street, Suite 3170
 New Orleans, Louisiana 70130
 (504) 581-7876 - Telephone
 (504) 581-7878 - Telecopier
 tbelesky@maritelinc.com

7. Please check type of organization?

_____ Individual X Corporation
 _____ Partnership _____ Other (Specify)

Date corporation was formed March 31, 1988

In what state? Tennessee

8. Submit a copy of articles of incorporation and a copy of certificate of authority to transact business in Illinois. Attached as Exhibit One

9. List jurisdictions in which Applicant is offering service(s).

Applicant holds License Authorizations to offer Maritime Radio Services for: the North Atlantic Region, the Great Lakes Region, the Northern Pacific Region; the Mid-Atlantic Region, Southern Atlantic Region, the Mississippi River Region, the Southern Pacific Region, Hawaii, and Alaska, See Exhibit Two

10. Has the Applicant, or any principal in Applicant, been denied a Certificate of Service or had its certification revoked or suspended in any jurisdiction in this or another name?

_____ YES X NO

11. Have there been any complaints against the Applicant in any other jurisdiction?

_____ YES X NO

12. Will the Applicant keep its books and records in Illinois? _____ YES X NO

If NO, permission pursuant to 83 Ill. Adm Code Part 250 needs to be requested.

See Exhibit Three

MANAGERIAL

13. Please attach evidence of the applicant's managerial and technical resources and ability to provide service. This may be in either narrative form, resumes of key personnel, or a combination of these forms.

See Exhibit Four

14. List officers of Applicant.

Donald R. DePriest
Joseph L. Winn
Douglas Wiest

Richard F. Seney
Mitchell Hauser
Richard Carvalho

15. Does any officer of Applicant have an ownership or other interest in any other entity which has provided or is currently providing telecommunications services? YES X NO
16. How will Applicant bill for its service(s)? Applicant will require subscribers to pay monthly fees based on the level of service. For example, it offers three different plans (Safety, Cruiser & Mariner), each with varying degrees of other services included with the monthly fee.
17. How does Applicant propose to handle service, billing, and repair complaints? Applicant has a customer service center that will handle all billing, repair and other related questions from its customers and regulatory agencies. The contact name, address and phone number are listed in Question 5.
18. Will personnel be available at Applicant's business office during regular working hours to respond to inquiries about service or billing? X YES NO
19. What telephone number(s) would a customer use to contact your company? As indicated in Question 5, the contact telephone number is (504) 581-7876.
20. What are your procedures to prevent unauthorized "slamming" of customers?
Not Applicable for Maritime Services
21. If granted authority to operate as a local exchange carrier, will the applicant abide by the following 83 Illinois Administrative Code Parts: 705, 710, 720, 725, 735, 755, 756, 757, 770, and 772?
 YES X NO (If no, please provide an explanation.) NOT APPLICABLE
22. Will the applicant sign and return membership forms to the Universal Telephone Assistance Corporation and the Illinois Telecommunications Access Corporation? YES X NO NOT APPLICABLE

FINANCIAL

23. Please attach evidence of applicant's financial fitness through the submission of its most current income statement and balance sheet, or other appropriate documentation of applicant's financial resources and ability to provide service.

Please See Exhibit Five

TECHNICAL

24. Does Applicant utilize its own equipment and/or facilities? X YES NO

If YES, please list: Applicant will be installing up to nine 350' towers with associated 10'x20' shelter buildings to house all related equipment.

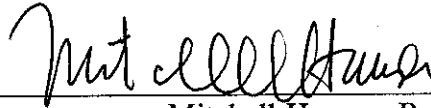
If NO, which facility provider(s)'s services does Applicant use? N/A

25. Please describe the nature of service to be provided (e.g., operator services, internet, debit cards, long distance service, local service).
As indicated above, Applicant will be providing VHF Marine communications services, including ship-to-shore, ship-to-ship, shore-to-ship, messaging and operator services for its subscribers.

26. Will technical personnel be available at all times to assist customers with service problems?

 X YES NO

27. If Applicant intends to provide payphone service, will the equipment utilized comply with FCC requirements and Finding (9) of the Commission Order entered in Docket No. 84-0442 on June 11, 1986, including, but not limited to: (a) touch dialing; (b) access to 9-1-1 and "0" operator dialing without use of a coin; (c) rules governing use of payphones by disabled persons; (d) ability to complete local and long-distance calls; (e) unlimited duration for local calls; and (f) a message explaining the telephone's general operations, dialing instructions for emergency assistance, payphone owner's name, method of reporting service problems and method of receiving credit for faulty calls? YES X NO - NOT APPLICABLE.



Mitchell Hauser, President
WJG MariTEL Corporation

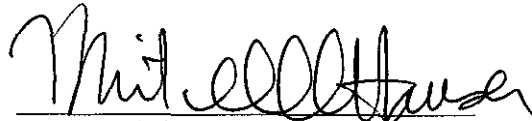
VERIFICATION

This application shall be verified under oath.

OATH

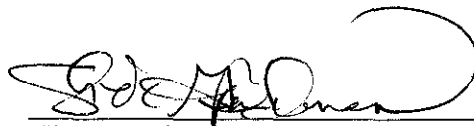
State of New York)
County of New York)ss

Mitchell Hauser makes oath and says that he is President of WJG MariTEL Corporation and that he has examined the foregoing application and that to the best of his knowledge, information, and belief, all statements of fact contained in the said application are true, and the said application is a correct statement of the business and affairs of the above-named applicant in respect to each and every matter set forth therein.


Mitchell Hauser

Subscribed and sworn to before me, a Notary Public/ Sheri G Buchman
(Title of person authorized to administer oaths)

in the State and County above named, this 11th day of April, 2000.


(Signature of person authorized to administer oath)

SHERI G. BUCHMAN
Notary Public, State of New York
No. 4883207
Qualified in Suffolk County
Certificate Filed in New York County
Commission Expires Jan. 26, 2001